

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 370

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OPEIU JB Moss Voice of the Electorate (VOTE)

Full Name (Last, First, Middle Initial)

A. Donald Foti

Mailing Address 4071 PORT CHICAGO HWY ST 200

City State Zip Code
CONCORD CA 94520

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 29 2011

Transaction ID : C4462615

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Donald Foti

Mailing Address 4071 PORT CHICAGO HWY ST 200

City State Zip Code
CONCORD CA 94520

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 29 2011

Transaction ID : C4464918

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Donald Foti

Mailing Address 4071 PORT CHICAGO HWY ST 200

City State Zip Code
CONCORD CA 94520

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Income Life

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 29 2011

Transaction ID : C4460336

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00